

UNITED STATES DISTRICT COURT
DISTRICT OF MINNESOTA

Patrick Berry, Henrietta Brown, Nadine Little, Dennis Barrow, Virginia Roy, Joel Westvig, Emmett Williams, *on behalf of themselves and a class of similarly-situated individuals*; and ZACAH,

Case No. 20-CV-02189-WMW-LIB

District Judge Wilhelmina Wright
Magistrate Judge Leo I. Brisbois

Plaintiffs,

vs.

**DECLARATION OF
STEPHANIE ABEL**

Hennepin County; Hennepin County Sheriff David Hutchinson, *in his individual and official capacity*; City of Minneapolis; Minneapolis Mayor Jacob Frey, *in his individual and official capacity*; Medaria Arradondo, *in his individual and official capacity*; Superintendent of the Minneapolis Park and Recreation Board Al Bangoura, *in his individual and official capacity*; Park Police Chief at the Minneapolis Park and Recreation Board Jason Ohotto, *in his individual and official capacity*; Police Officers John Does; and Police Officer Jane Does,

Defendants.

I, Stephanie Abel, make this declaration pursuant to 28 U.S.C. § 1746.

1. I am the Area Manager for Clinical Services in the Public Health Department at Hennepin County. I have been in this role for approximately 3 years. Before that, I worked for Hennepin County Health Care for the Homeless for approximately 16 years, first as an outreach worker and then as the Administrative Manager. I have a B.A. in public health, and I am a registered nurse.

2. In my role as Area Manager, I oversee all programs in the Public Health Department that provide direct clinical care to Hennepin County residents. These programs include Health Care for the Homeless, as well as Hennepin County's outpatient mental health center, emergency mental health response, and public health clinic.

3. Health Care for the Homeless works to decrease barriers to accessing health care by bringing critical health and wellness services to people who are experiencing homelessness. Health Care for the Homeless operates health care clinics in shelters and drop-in centers, and it also engages in outreach to bring these services to individuals living outside. Staff address individual health concerns and provide treatment for physical health, mental health, and substance use—including diagnosis, treatment, medications, counseling, therapy, and connections to ongoing specialty physical, chemical dependency, and mental health services. Any adult or child experiencing homelessness is eligible for services, including people living outside, in shelter or transitional housing, or with friends or relatives.

4. Health Care for the Homeless has eleven staff members assigned to outreach to individuals living outside. These staff include nurse practitioners, registered nurses, and social workers. Staff spend 40 hours per week engaging in outreach to unsheltered people; hours vary based on demand and include evenings. Services include physical health, mental health, and chemical dependency care, including medication-assisted therapy for individuals with opioid use disorder.

5. Over the summer, Health Care for the Homeless provided outreach services to encampments of individuals experiencing homelessness, including, for example, the

encampments at Powderhorn Park in Minneapolis. From a public health perspective, I was deeply concerned about the safety of individuals in the Powderhorn Park encampments, due to violence within the camp and widespread injection drug use that I and my staff witnessed. On two or three days over the summer, my staff and I were concerned about safety to the extent that we decided that it was no longer safe for staff to provide services in the Powderhorn Park encampments. This was a rare occurrence for Health Care for the Homeless. As part of routine work, Health Care for the Homeless staff work in outreach conditions and are rarely concerned for their physical safety.

6. Shelters in Hennepin County have taken extensive efforts to reduce the spread of COVID-19, including establishing hotel contracts to (1) provide private rooms to individuals experiencing homelessness who were living in large congregate settings and who are at high risk of experiencing significant health consequences if they contracted COVID-19, and (2) provide a place for those individuals experiencing homeless who were known to have COVID-19 to recover and to separate them from exposing others to the virus. This strategy has been a success to date. Since the beginning of the pandemic, in Hennepin County, only 134 people in shelters have tested positive for COVID-19, and there have been no deaths due to COVID-19. The rate of COVID-19 infections and the rate of COVID-19 deaths among individuals in Hennepin County shelters is far lower than those rates in the general population.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 21, 2020.

s/ Stephanie Abel
Stephanie Abel